## DEPARTMENT OF SOCIAL AND HEALTH SERVICES MEDICAL ASSISTANCE ADMINISTRATION Olympia, Washington

To: Kidney Centers Memorandum No: 02-46 MAA

Managed Care Plans Issued: June 7, 2002

Regional Administrators

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From: Douglas Porter, Assistant Secretary Supercedes: 01-30 MAA

Medical Assistance Administration (MAA)

Subject: Updates and the RBRVS\* and Vendor Rate Increase for Kidney Centers

Effective for dates of service on and after July 1, 2002, the Medical Assistance Administration (MAA) will implement a one and one-half (1.5) percent vendor rate increase as authorized by the 2001-2003 Biennium Appropriations Act.

**Retroactive to dates of service on and after January 1, 2002**, MAA reimburses for the following new codes for blood units used in outpatient blood transfusions performed by Kidney Centers: P9045, P9046, P9047, P9048, and P9050 (see descriptions on attached replacement pages).

To obtain MAA's billing instructions and/or numbered memorandums electronically, go to MAA's website at <a href="http://maa.dshs.wa.gov">http://maa.dshs.wa.gov</a> (click on the Provider Publications/Fee Schedules link).

Attached is replacement page 9/10 for MAA's <u>Kidney Center Billing Instructions</u>, dated August 2000.

Bill MAA your usual and customary charge.

<sup>\*</sup> RBRVS stands for Resource Based Relative Value Scale

Revenue Code	Description			
Peritoneal Dialysis - Outpatient or Home				
831*	Peritoneal dialysis (Not in combination with 841, 851, and 880)			
835	Home dialysis helper (NOT COVERED BY MEDICARE)			
Continuous Ambulatory Peritoneal Dialysis (CAPD) - Outpatient or Home				
841*	CAPD/Composite Rate (Not in combination with 831, 851, and 880)			
845	Home Dialysis Helper (NOT COVERED BY MEDICARE)			
Continuous Cycling Peritoneal Dialysis (CCPD) - Outpatient or Home				
851	CCPD/Composite Rate (Not in combination with 831, 841, and 880)			
855	Home Dialysis Helper (NOT COVERED BY MEDICARE)			
Miscellaneous Dialysis				
880	General Classification (Not in combination with 831, 841, and 851)			
881	Ultrafiltration			

August 2000 - 9 - Fee Schedule

For clients who have dual coverage (Medicare/Medicaid) the asterisked (\*) services will be covered by Medicare at 80%.

## **HCFA Common Procedural Coding System (HCPCS) Codes**

The new maximum allowable fees for blood units used in outpatient blood transfusions performed by the Kidney Centers are as follows:

HCPCS		7/1/02 Maximum
<b>Procedure Code</b>	Blood Processing for Transfusion	Allowable Fee
P9010	Blood (whole), for transfusion, each unit	\$55.44
P9011	Blood (split unit), specify amount	By Report
P9012	Cryoprecipitate, each unit	26.35
P9016	Red blood cells, leukocytes reduced, each unit	45.53
P9017	Fresh frozen plasma (single donor), each unit	47.82
P9019	Platelets, each unit	By Report
P9020	Platelet rich plasma, each unit	By Report
P9021	Red blood cells, each unit	66.64
P9022	Red blood cells, washed, each unit	20.62
P9023	Plasma, pooled multiple donor, solvent/detergent treated, frozen, each unit	By Report
P9031	Platelets, leukocytes reduced, each unit	By Report
P9032	Platelets, irradiated, each unit	By Report
P9033	Platelets, leukocytes reduced, irradiated, each unit	By Report
P9034	Platelets, pheresis, each unit	By Report
P9035	Platelets, pheresis, leukocytes reduced, each unit	By Report
P9036	Platelets, pheresis, irradiated, each unit	By Report
P9037	Platelets, pheresis, leukocytes reduced, irradiated, each	By Report
	unit	
P9038	Red blood cells, irradiated, each unit	By Report
P9039	Red blood cells, deglycerolized, each unit	By Report
	Red blood cells, leukocytes reduced, irradiated, each	
P9040	unit	By Report
P9041	Infusion, albumin (human), 5%, 50 ml	By Report
<del>P9042</del>	Infusion, albumin (human), 25%, 10 ml Discontinued	By Report
	with dates of service on and after 01/02/02.	
P9043	Infusion, plasma protein fraction (human), 5%, 50 ml	By Report
P9044	Plasma, cryoprecipitate reduced, each unit	By Report
P9045	Infusion, albumin (human), 5%, 250 ml	By Report
P9046	Infusion, albumin (human), 25%, 20ml	By Report
P9047	Infusion, albumin (human). 25%, 50ml	By Report
P9048	Infusion, plasma protein fraction (human), 5%, 250ml	By Report
P9050	Granulocytes, phereis, each unit	By Report